## PART B - FEE(S) TRANSMITTAL

Complete and send	this form, together w	ith applicable f	ee(s), to: <u>Mail</u> or <u>Fax</u>	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg (571)-273-2885	FEE r Patents inia 22313-1450		
INSTRUCTIONS: This form should be assed for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence factuating the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or desired otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification and provided the patent of the correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification and provided the patent of the correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification and provided the patent of the correspondence address as indicated unless correspondence address.							
	TE ADDRESS (Note: Use Block 1 for		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
SUN MICROSY c/o PARK VAUGI P.O. BOX 7865	HAN & FLEMING, LI	.P	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
FREMONT, CA 94537 06/30/2006 WABDELR3 00000001 10087056				Daniel V	/aughan	(Depositor's name)	
01 FC:1501 1400.00 OP			June 29		2006	(Signature)	
APPLICATION NO.	300,00 FILING DATE		IRST NAMED INVE	INTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/087,056	02/28/2002		John M. Lo		SUN-P5499 3249		
	ARIABLE LENGTH INTE	R-PACKET GAP					
APPLN. TYPE	SMALL ENTITY	ISSUE FEI	B 1	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400		\$300	\$1700 08/03/2006		
EXAM	EXAMINER ART UN		VIT CLASS-SUBCLASS				
GREY, CHRISTOPHER P 261				370-389000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Sun Microsystems, Inc. Santa Clara, California							
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are enclosed:  All Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			Ab. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
a. Applicant claims Si	(from status indicated above MALL ENTITY status. See is requested to apply the Issu	17 CFR 1.27.			LL ENTITY status. See 37 C		
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Authorized Signature	Slamed & Very	fra-		Date <u>Ju</u>	ne 29, 2006	******	
Typed or printed name				Registration N			
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.  Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.							



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Please accept the attached Issue Fee payment and Fee Address Indication Form for the above-referenced patent application.

Forms PTOL-85 (Part B), PTO-2038 and PTO/SB/47 follow.

Thank you,

Daniel E. Vaughan

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